लाइट बंद हो जाएगी और शाम होते ही लाइट जल जाएगी। इस सिस्टम को हमने मेट्रो दिल्ली में चालू कर दिया है, कलकत्ता में भी चालू है अंडर ग्राउंड छोड़ करके। कुछ महानगरों में भी चालू है। पूरे देश में इसको करने के लिए हर स्टेट गवर्नमेंट को मदद देकर इस केम्पेन को हमने जागरूक किया है। सभापति महोदय, इसमें हमारा फायदा हुआ है। और राष्ट्रपति भवन में तो यह लगभग 25 प्रतिशत की बचत हुई है।

Linking of Army hospitals with private hospitals

*409. SHRI C. PERUMAL: Will the Minister of DEFENCE be pleased to state:

(a) whether it is proposed to link army hospitals with private hospitals to provide service to defence personnel;

(b) if so, the details thereof;

(c) whether army personnel are eligible for medical insurance cover for heart, burns and two other ailments only;

(d) whether it is proposed to extend insurance cover for other ailments also;

(e) if so, the details thereof; and

(f) if not, the reasons therefor?

THE MINISTER OF DEFENCE (SHRI PRANAB MUKHERJEE): (a) and (b) There is no proposal to link Army hospitals to private hospitals.

(c) There is no medical insurance cover for Army personnel. Serving Army personnel are provided comprehensive medical cover free of cost.

(d) to (f) In view of (c) above question does not arise.

SHRI C. PERUMAL: Sir, the hon. Minister has said, 'No' to the first part of my question. I would like to know whether the ex-defence personnel are entitled to a comprehensive medical cover free of cost. I would also like to know whether the existing Army Hospitals are enough to cater to the serving defence personnel. If 'No' is there any proposal to set up more army hospitals in the country?

SHRI PRANAB MUKHERJEE: Sir, we are having 107 Army Hospitals, 11 Air Force hospitals and 7 Navy hospitals. So, a total of 125 Army

Hospitals are there, starting from each Command area, wherever the Armed Forces are located. In addition to that, for particular types of cases, where there are no facilities available in the Army Hospitals, they can get the treatment done outside.

AN. HON. MEMBER: Sir, the microphone is not working.

SHRI PRANAB MUKHERJEE: I think it is working now. So, when they are being treated in any other hospital, the cost is being reimbursed. But, most of the hospitals, the Army Hospitals, are updated and well-equipped, and all sorts of facilities are available there. But there may be some out of place, where immediate requirement may not be met by the Army Hospital. For that, this provision is being made.

MR. CHAIRMAN: Question Hour is over.

WRITTEN ANSWERS TO STARRED QUESTIONS

Criteria of Rural Employment Guarantee Scheme

*405. SHRI RAJNATH SINGH: Will the Minister of RURAL DEVELOPMENT be pleased to state:

(a) what is the criteria of Rural Employment Guarantee Scheme and whether Government have identified those rural areas where there are lots of unemployed youths;

(b) if so, the details thereof; and

(c) whether monitoring mechanism has been fixed by Government so that the lot of youths may get employment?

THE MINISTER OF RURAL DEVELOPMENT (SHRI RAGHUVANSH PRASAD SINGH): (a) and (b) Parliament has approved the National Rural Employment Guarantee Act (NREGA) in September 2005. According to Section 1(3) of the Act, the entire country would be covered within 5 years from the date of the enactment of the Act. In the first phase of its implementation, it would be implemented in 200 districts identified by the Planning Commission. The NREGA would be implemented in first phase in districts presently covered under National Food for Work Programme (NFFWP) and Rashtriya Sum Vikas Yojana